APPLICATION DATA SHEET

Application Information

Application Number:: Not Yet Assigned

Filing Date:: March 26, 2004

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::
Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::
Computer Readable Form

(CFR)?::

Number of Copies of CFR::

Title:: USE OF BENZYL ALCOHOL, AND OTHER PHENOLIC

PRESERVATIVES TO REDUCE PAIN DURING

INTRADERMAL INJECTION

Attorney Docket Number:: 07767-201502

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

Latin Name::

Variety Denomination Name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship::

United States

Country::

U.S.A.

Status::

Full Capacity

Given Name::

Diane

Middle Name::

E.

Family Name::

SUTTER

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

101 Langdale Place

City of Mailing Address::

Cary

State or Province of Mailing

North Carolina

Address::

Country of Mailing Address::

U.S.A.

Postal or Zip Code of Mailing

Address::

27709

Applicant Authority Type::

Inventor

Primary Citizenship::

United States

Country::

U.S.A.

Status::

Full Capacity

Given Name::

Ronald

Middle Name::

J.

Family Name::

PETTIS

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

101 Langdale Place

City of Mailing Address::

Cary

State or Province of Mailing

North Carolina

Address::

Country of Mailing Address::

U.S.A.

Postal or Zip Code of Mailing

27709

Address::

Applicant Authority Type::

Inventor

Primary Citizenship::

United States

Country::

U.S.A.

Status::

Full Capacity

Given Name::

Scott

Middle Name::

Allen

Family Name::

KAESTNER

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

19 Lynbrook Circle

City of Mailing Address::

Durham

State or Province of Mailing

North Carolina

Address::

Country of Mailing Address::

27712

Postal or Zip Code of Mailing

Address::

Correspondence Information

Correspondence Customer

26694

Number::

(202) 344-4651

Phone Number:: Fax Number::

(202) 344-8300

E-Mail Address::

ashobbs@venable.com

Representative Information Representative Customer 32330 Number:: **Domestic Priority Information** Application:: **Continuity Type:: Parent** Parent Filing Date:: Application:: **Continuation of** Continuation of Continuation of Continuation of **Foreign Priority Information** Country:: **Application** Filing Date:: **Priority Claimed::** Number:: **Assignee Information Assignee Name:: Street of Mailing Address::** City of Mailing Address:: State or Province of Mailing Address:: **Country of Mailing Address::**

Postal or Zip Code of Mailing

Address::